C.I.



## BOROUGH OF LEIGH

# ANNUAL REPORT

OF THE

# Medical Officer of Health

FOR THE

Year ending December 31st, 1931

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## BOROUGH OF LEIGH, 1931.

## HEALTH COMMITTEE.

#### Chairman:

Councillor T. R. GREENOUGH, J.P.

Deputy Chairman:

Councillor I. PARRY.

The MAYOR (Councillor T. HINDLEY, J.P.)

Alderman COLLIER, J.P.

- ,, FAIRHURST, J.P.
- " W. GRUNDY, J.P.
- ,, W. HINDLEY, J.P.

Councillor BETTON, J.P.

- ,, BOYDELL, J.P.
- ,, GIBSON
- ,, GOUGH
- ,, HASELDINE
- ,, HIGENBOTTAM, J.P.
- ,, МАСК, Ј.Р.
- " SEDDON

## PUBLIC HEALTH STAFF

Of	fice held	. Name.	Qualifications.	Other Offices held.
				.P., School Medical
·		ealthJ. Clay Beckitt		Officer
	ssistan Iedical of Hea		M.R.C.S., L.R.C.1 D.P.H.	
†Ch	ief Sar Insp	nitary ectorEdwin Jackson .		Inspector underthe Canal boats Acts. Rat Officer
†Sa	nitary Insp	ectorWm. T. Frost	Cert. R.San.I., M.S.I.A.	•••
†	, ,	Arthur N. Nickli	n Cert. R.San.I.,	•••
Vet	erinary Sı	argeonJames Holt	M.S.I.A. .M.R.C.V.S.	Diseases of Animals Act
хНе	ealth N	urseMiss A.B. Bely <b>e</b> a	a. Children's Trainin C.M.B., R.S.I. Ce for Women Healt Visitors and Scho Nurses.	rt. h
$\boldsymbol{x}$	,,	Miss C. A. Smith.	General and Fever Training	School Nurse
$\boldsymbol{x}$	,,	MissA.M.Boydel	l. General Training C.M.B. Cert. Q.V.J.I.	School Nurse
$\boldsymbol{x}$	,,	MissL.M.Goulde	n General Training C.M.B.	School Nurse
$\boldsymbol{x}$	,,	Miss M. Smith .	Health Visitor's Experience, C.M.	
x§	,,	Miss A. Shorrock	.General Training C.M.B. Health Visitor's C	
x**	,,	Miss D. Lea .	General Training C.M.B. Health Visitor's Ce	
Pu	_	Fever Mrs. Dickinson. Jurse	General Training	Private
Cler	·k	S. Cunningham		
		ution to salary by Governme ution to salary by the Count		

<sup>†</sup>Contribution to salary by the County Council.
\*Engaged jointly in Maternity and Child Welfare and School Medical Work.

<sup>\$</sup>Resigned 28th February, 1931.
\*\*Appointed 17th September, 1931.

## PUBLIC HEALTH STAFF—Continued

### MATERNITY HOME.

Office held.		Name.		Qualifications.
Medical Officer (Honorary)	• • •	L. A. P. Burt		M.B., Ch.B.
*Matron	•••	Miss R. M. Roberts		General Training C. M.B.,
				State Registered
*Sister	•••	Miss S. J. Storey		General Training C.M.B.,
				State Registered
* ,,		Miss W. Irons		General Training C.M.B.,
				State Registered
*Staff Nurse	•••	Miss B. Brown		General Training C.M.B.,
				State Registered
* ,,	• • •	Miss A. Green	• • •	General Training C.M.B.,
				State Registered
* ,,	• • •	Miss F. Curtis		General Training C.M.B.,
				State Registered
* ,,		Miss C. Ross	•••	General Training C.M.B.,
				State Registered
*Contribution to	salary by	y Government Grant.		

# Medical Officer of Health's Report

FOR 1931

Public Health Department,

Town Hall,

Leigh, Lancs.

To the Chairman and Members of the Health Committee of the Borough of Leigh.

Gentlemen,

I have the honour to present my Report on the Health and Sanitation of your Borough for the year ending 31st December, 1931.

The shortage of houses is still causing extreme overcrowding, with its accompanying interference with health and comfort. The inconvenience experienced is causing a feeling of dissatisfaction and unrest very prejudicial to the well-being of those concerned. The resulting overcrowding is reflected in the less clean condition of the houses and occupants. It is extremely difficult to keep a small house, with few conveniences for cleansing, free from vermin, however great the desire, and where the management of the house is divided between two or three families, it becomes almost impossible. Such circumstances and their specified results abound in the town.

I am pleased to have to report an increase in the number of births. It is 766, compared with 682 last year. This gives us a birth rate rather above the average of most Lancashire towns, as the following table of comparison with towns of a similar size shows:—

COMPARATIVE VITAL STATISTICS FOR THE YEAR 1931.

								DEATH	RATE	FROM			
	Population tion (estimat'd)	Birth Rate	Infantile Mortality Rate	Corrected Death Rate	Pulmon- ary Tuber- culosis	Non-Pul- monary Tuber- culosis	Respiratory Diseases (except T'b'rc'l'sis)	Measles	Whoopi'g Cough	Diarrhœa (under 2 years)	Scarlet	Diphth- eria	Enteric
:	43,380	10.6	56.15	14.10	0.57	0.11	1.89	0.00	90.0	0.05	0.05	0.05	0.00
:	27,750	12.3	78.00	13.20	19.0	0.02	5.06	0.00	20.0	0.03	0.03	0.00	0.03
:	31,180	14.5	00.62	13.70	0.35	0.03	0.12	00.0	00.0	90.0	0.16	0.03	0.00
:	24,000	12.4	110.00	14.20	0.83	0.13	80.0	00.0	80.0	0.13	0.00	80.0	0.04
:	36,420	11.3	82.00	15.59	0.35	91.0	1.81	00.0	80.0	0.02	00.0	0.05	60.0
:	44,770	13.5	84.10	11.70	69.0	0.50	1.56	60.0	0.11	0.00	†0·0	0.13	0.00
:	28,720	12.3	84.00	12.60	0.55	0.17	1.60	00.0	0.03	0.03	00.0	0.03	0.00
•	45,800	15.7	00.86	11.90	0.48	0.21	2.16	00.0	0.05	90.0	00.00	0.04	0.05
:	29,520	13.2	00.66	14.80	19.0	0.14	3.25	0.03	0.50	00.0	0.00	0.16	00.0
:	24,970	13.3	80.00	12.80	0.44	0.05	1.32	00.0	0.04	0.16	0.00	0.04	0.00
:	24,823	14.4	81.00	14.00	0.52	10.0	3.50	00.0	00.0	0.01	00.0	0.01	0.01
WALES.	•	15.8	00.99	12.30	:	:	:	80.0	90.0	00.9	80.0	20.0	0.01

During the year 71 children under one year died, making a rate of 98 per 1,000 births.

I have to acknowledge indebtedness to various charitable agencies for assistance in circumstances of distress and difficulty outside the scope of the Municipal organisation. Particularly I would mention the Save the Children Fund, the Needlework Guild, the District Nursing Association, the Guild of Help, the Leigh Health Society and the Women's Guild of Service.

My thanks are due to the ladies who so generously give their services week by week to assist in carrying on the work at the Welfare Centres. Without their help the paid staff would have to be enlarged or the work considerably diminished.

#### Social Conditions, including the Chief Occupations of the Inhabitants.

The inhabitants of the Borough consist almost entirely of the industrial class, coal mining occupying the largest number of any single trade, closely followed by textile workers, chiefly in cotton. The insufficiency of houses is keenly felt by the working classes, and the overcrowding must of necessity prejudicially influence their social life. I consider the smoky condition of the atmosphere has a deleterious influence on the general health and predisposes to respiratory diseases, particularly bronchitis and pneumonia.

#### GENERAL STATISTICS.

Area in acres (Census 1931)			• • •	6,359
Population (Census 1931)		• • •		45,313
Population (Registrar-General's	Estin	nate		
	mid	dle 193	(1)	45,800
Density of Population per acre				7.20
Number of Inhabited Houses (be	eginn	ing 193	, ı )	10,910
Number of New Houses Certifie	d in 1	931		141
Total at end of 1931			• • •	11,051
Number of Families or Separate	Occu	ipiers (	1931)	11,014
Number of Persons per House	• • •			4.14
Rateable Value		• • •	£	202,457
Sum Represented by a Penny Ra	ate		* * *	£750
General Rate			• • •	12/9

### EXTRACTS FROM VITAL STATISTICS OF THE YEAR 1931.

	Male. Female			
Live Births { Legitimate 721   22	$374 \cdots 347$	Birth Ra the esti	te per 10 mated res	ooo of sident
		popula	tion 1	5.7
Still-births 41	27 I4		er 1000 nd still-b	
		births		,
Deaths 547 2	274 273	Death R	ate per 10 mated res	ooo of
			tion I	
Deaths from diseases and accidents of				
pregnancy and child-birth	J from othe	r causes		Ι
Death-rate of infants under one year	of age:—			
All infants per 1000 live births	•••			98
Legitimate infants per 1000 legit	timate live bi	rths		100
Illegitimate infants per 1000 ille	gitimate live	births	•••	45
Deaths from Measles (all ages)	• • • • • • • • • • • • • • • • • • • •			Nil
,, Whooping Cough (all a	iges)			I
,, Diarrhœa (under 2 years	s of age)			3

Specify any unusual or excessive mortality during the year which has received or required comment:—

Influenza, Bronchitis, Pneumonia and Heart Disease.

			Birth- rate.	Death- rate.	Phthisis Death- rate.	Rate of Deaths under 1 year per 1000 live Births.
1930			14.7	10.4	0.77	57
1931			15.7	11.9	0.48	98
Mean of	5 years,					
1926.	1930	( • •	15.3	12'9	0.74	87
Increase	or Decrea	ıse				
in 19	31 on—					
Five Yea	rs' Avera	ge	+0.4	I °O	-0.56	+ 11
1926.	-30					
Previous	Year	• • •	+ 1.0	+ 1.2	-0°29	+ 41

### CAUSES OF SICKNESS.

From information received by consulting death returns, and cause of absence from School of elementary school children, etc., I gather heart disease, pneumonia, bronchitis, cancer and influenza have been responsible for the largest number of cases of sickness and death.

SUMMARY OF THE PRINCIPAL CAUSES OF DEATH, 1931 (Estimated on the figures given by the Registrar General).

### GENERAL DISEASES.

GENERAL DISEASES.				
		No. of deaths.	Per cent. of total deaths.	Death-rate per 1000 of population.
Diarrhœa (under 2 years)		3	0.20	0.06
Specific Fevers		8	1.46	1.74
Influenza		25	4.57	0.54
Whooping Cough		I	0.18	0.02
Measles		hydrodia Millahelm	Address of the State of the Sta	na ka di kanangan
CONSTITUTIONAL DISEASES.				
Tuberculosis of respiratory system	n	22	4.02	0.48
Other Tubercular Diseases		01	1.82	0.51
Cancer		52	9.20	1.13
DEVELOPMENTAL DISEASE.				
Congenital Debility		40	7:31	0.87
LOCAL DISEASES.				
Heart and Circulatory System		I 20	21.93	2.62
Respiratory System—				
(a) Bronchitis		41	7.49	0.89
(b) Pneumonia (all forms)		53	9.68	1.12
(c) Other Respiratory Disease	S	5	0,81	0.10
Urinary System		15	2.74	0.32
Reproductive System—				
(a) Puerperal Sepsis			Special Speciality	Annical contacts
(b) Other Puerperal Causes		Ι	0.18	0.02
VIOLENT CAUSES.				
Accidents		22	4.02	0.48
Suicides		7	1.58	0.12
OTHER DISEASES.	* *	122	22.30	2.66

Birth-rate, Death-rate, and Analysis of Mortality during the Year 1931.

	Birth-rate	rate			Annual D	eath-rate p	Annual Death-rate per 1,000 Population.	pulation.			Rate per 1,000 Births.	per lirths.
	per 1,000 total population.	al ation.	All	Enteric Fever	Small-nox	Weasles	Scarlet Fever	Whooping	Diph-	Violence	Diarrhœa and	Total Deaths
	Live Births.	Still Births.						0			(under 2 years).	1 Year.
Leigh	15.7	15.7 0.89	11.9	0.03	00.0	0.00	0.00	0.03	0.04	0.63	90.0	86
England and Wales	15.8	19.0	12.3	0.01	0.00	80.0	80.0	90.0	10.0	<b>†</b> 9.0	0.9	99
107 Great Towns, including London (Census Populations exceeding 50,000)	16.0	29.0	15.3	00.0	0.00	0.16	0.01	0.07	80.0	87.0	8.4	7.1
157 Smaller Towns (1921 Adjusted Populations 20,000—50,000)	15.6	0.73	11.3	0.00	00.0	20.0	0.01	0.05	0.05	0.43	4.0	62
mopuoT	0.61	0.50	12.4	0.01	00.0	0.03	0.05	10.0	90.0	0.57	2.6	65

## GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA.

#### NURSING ARRANGEMENTS AND HOSPITALS.

#### NURSING IN THE HOME.

- (a) General.—A Local District Nursing Association, supported entirely by voluntary contributions, carries on a very useful work. Two fully-trained Nurses are engaged and render very highly appreciated service in the homes. They are not allowed to visit infectious cases or attend confinements. There is no definite scheme of co-operation between the Association and the Public Health Department of the Local Authority, but constant reference from one to the other is carried out by the staffs. The Corporation does not subscribe to the funds of the Nursing Association. Occasionally a local private trained nurse is available for engagement, but such services are usually supplied through private nurses' homes in one of the neighbouring towns.
- (b) Infectious Diseases.—The Health Nurses meet the demand as far as possible in the case of children suffering from Measles, Diarrhæa, Ophthalmia Neonatorum, &c. Arrangements have been made with the Manchester Royal Eye Hospital to provide in-patient treatment to infants suffering from Ophthalmia Neonatorum if such treatment is requested by the medical practitioner.

A fee of  $\pm 3$  3s. od. per week is paid by the local authority, to include the mother of the patient.

Under the Public Health (Puerperal Fever and Puerperal Pyrexia) Regulations, 1926, arrangements have been made with a Specialist attached to a teaching hospital to visit the homes of Puerperal Fever and Puerperal Pyrexia patients for consultation on request of the Medical Attendant.

Also under similar circumstances for the supply of a trained nurse.

#### **MIDWIVES**

Since 1st April, 1931, the Borough Council has been the Local Supervising Authority under the Midwives Acts 1902-1926.

The number of Certified Midwives on the Register on 31st December 1931 was 25.

Of these, 23 or 92 per cent. were trained and 2 were bona-fides, *i.e.*, were registered by virtue of being in practice at the time the Midwives' Act 1902 came into force.

#### Records from Midwives.

The following statement shows the number of copy "medical help" records received during the period in respect of abnormality during:—

(a)	Pregnancy	38
(b)	Labour	102
(c)	Lying-in	11
(d)	Of the Child	44
	Total	195

The following table gives the number of notifications received from the Certified Midwives during the period :—

(a)	Record of sending for Medical Help	195
(b)	Deaths of Mother or Child	18
(c)	Stillbirths.	17
(d)	Laying out of the dead	4
(e)	Liability to be a source of infection	3
(f)	Artificial feeding	8

#### Payment of Doctors' Fees.

Under the Midwives Act, 1918, the number of claims from medical practitioners called in by midwives in "cases of emergency" as defined by the rules of the Central Midwives Board was 72, amounting to the sum of £109 17s. 6d.

#### Respective Number of Cases Attended.

- 2 Midwives attended over 100 cases.
- 2 Midwives attended between 75 and 100 cases.
- Nil Midwives attended between 50 and 75 cases.
  - 1 Midwife attended between 25 and 50 cases.
  - 10 Midwives attended between 5 and 25 cases.
  - 3 Midwives attended less than 5 cases.

#### Puerperal Fever and Puerperal Pyrexia.

The Public Health (Notification of Puerperal Fever and Puerperal Pyrexia) Regulations came into operation on the 1st October, 1926.

The medical practitioner is required to notify each case to the local Medical Officer of Health and the Local Authority must make arrangements to provide, on the request of the medical practitioner, one or more of the following:—

- (a) A second medical opinion on the case.
- (b) A bacteriological examination.
- (c) Admission of the patient into an appropriate hospital.
- (d) The services of a trained nurse at home.

Arrangements for all these services have been made and during the year 1931, requests were made and complied with under the respective headings as follows:—

- (a) 4
- (b) Nil.
- (c) 2
- (d) Nil.

#### Ophthalmia Neonatorum.

Similar Regulations exist with regard to Ophthalmia Neonatorum.

By notification and medical help records received from Midwives 11 cases of inflamation of, or discharge from the eyes came under notice. Of these, 6 were notified as Ophthalmia Neonatorum by the medical practitioners.

No request was made for Hospital treatment. All were treated at home and nursed by the Health Nurses.

In no case was the vision impaired.

### Disciplinary Measures.

With the exception of a few minor breaches of the Rules the midwives carried on their practices in a satisfactory manner.

Cautions were administered personally in every case.

#### LABORATORY WORK.

Arrangements exist for the bacteriological examination of swabs and sputum, the carrying out of Widal tests, and examination of cerebrospinal fluid Telephonic communication is made to the medical practitioner in cases of positive results, and a report by post is sent in every case to this department.

The following table shows the number submitted during the year, with the results:—

Specimen.			Positive.	Negative.	Total.
Swab			 6	 62	 68
Sputum	• • •		 	 	 
Blood Te	st		 	 I	 I

Diphtheria anti-toxin and swabs are supplied by the Local Authority and special arrangements are made to facilitate the distribution to medical practitioners so that they may always have in their possession one swab and a preliminary dose of serum for immediate use. They are encouraged to administer an early application even to very doubtful cases of the disease.

#### LABORATORY FACILITIES.

Sputum of tubercular patients is usually examined by the Tuberculosis Service of the Lancashire County Council.

Samples of water are submitted to the Public Analyst or the Manchester University Public Health Laboratory.

Milk is tested for tuberculosis in Messrs. Evan's Biological Institute, Runcorn.

Analyses under the Food and Drugs Acts are carried out by the Public Analyst, the County Police taking and submitting the samples.

### PRIVATE AND ADOPTIVE ACTS IN FORCE IN THE DISTRICT.

Name of Act.

Date of Adoption.

Leigh Corporation Act

... September, 1903

Baths and Wash-houses Act, 1879

... In or about 1879

Infectious Disease (Notification) Act, 1889... 27th November, 1889

Private Street Works Act, 1892

... 30th July, 1895

Libraries Act, 1892

... 27th September, 1892

Public Health Acts (Amendment) Act, 1890:

Parts II. and III.

... 26th April, 1892

Parts IV. and V.

9th November, 1900

Housing of the Working Classes Act, 1890:

Part III.

... 11th March, 1902

Infectious Diseases (Prevention) Act, 1890... 14th October, 1902

Museum and Gymnasiums Act, 1891

... 11th March, 1902

Public Health Acts (Amendment) Act, 1907: Part II., Sections 22, 30 and 33 Part III., Sections 34, 36, 37, 49 and 51 Part IV., Sections 55, 56, 63, 64 and 65 Part V. (whole) Part X. (whole)

By Order of the Local Government Board, dated 1st May, 1913, which Order repealed the following Sections of the Leigh Corporation Act, 1903: Sections, 151, 167 (so far as relates to Sec. 34 of the Act of 1907), 210, 211 and 212.

Leigh Corporation Act, 1920

Public Health Act, 1925:

Part II., III., IV., V.

... 19th April, 1926

Housing (Rural Workers) Act, 1926

... 16th May, 1927

# BYE-LAWS AND REGULATIONS IN FORCE WITHIN THE DISTRICT.

	Date when Approved by
	made by Government Council. Department.
Prohibition of Book-making, Bettin	g
or Wagering in Public Places	16th Oct. 1900 —
Compulsory Lighting of Vehicles	13th Mar. 1900 3rd May 1900
Prevention of Danger from Telegrap Wires, &c.	h12th Mar. 1901 7th Oct. 1901
Markets	30th Aug. 190115th Oct. 1901
Omnibuses	10th Sept. 190126th Oct. 1901
Management, Use and Regulation	
the Public Baths	10th Sept. 190129th Oct. 1901
Drainage of Existing Buildings	8th April 190231st May 1902
New Streets and Buildings	ith Aug. 19253rd Nov. 1925
Slaughter-houses	14th Oct. 190229th Nov. 1902
Offensive Trades	14th Oct. 190229th Nov. 1902
Common Lodging-houses	14th Oct. 190229th Nov. 1902
Nuisances	9th Nov. 1903 2nd Jan. 1904
Tents, Vans, Sheds and similar	
Structures used for Human Hab	
	13th Oct. 190823rd Dec. 1908
Provision of Means of Escape in cas	
of Fire in certain Factories an	
Workshops in the Borough	of
Leigh	8th June 1909 2nd July 1909
For the Good Rule and Government	nt
of the Borough of Leigh and fo	
the Prevention of Nuisances	
_	8th Oct. 191228th Nov. 1912
For Regulating the Employment	
Children and Street Trading b	the state of the s
Young Persons	10th Aug. 192022nd Jan. 1921
Regulations as to Internal Water	
Fittings, Service Pipes, &c.	
Regulating the Travelling and Prevention of Nuisances in Moto	
Omnibuses	13th June 192223rd Aug. 1922
Pleasure Grounds	12th Dec. 19227th Feb. 1923
Smoke Abatement	29th Oct. 192919th Dec. 1929
Nursing Homes	29th Oct. 192919th Dec. 1929
S	

#### HOSPITALS

The only change in the hospital service of the district is the removal of the Council's Maternity Home to larger premises on October 31st, 1931.

Previous to that date the Home consisted of 5 beds; the new premises allow of 18 beds.

The particulars of the new home are as follows:—

Name and situation	Purpose and No.	By whom provided.
of Institution.	$of\ beds.$	
Leigh Maternity Home	Maternity	M. & C. W. Committee
The Firs, LEIGH.	18 beds.	of Leigh Corporation.

**Staff**:—1 Medical Officer (Honorary).

- 1 Matron.
- 2 Sisters.
- 4 Staff Nurses.

The patients are attended by their own Medical Practitioner, as desired or necessary.

The Maternity Home is the only residential institution belonging to the Leigh Corporation.

Up to the time of removal to the larger premises at the end of October, there was an over-demand for beds.

The following are the particulars for the year ending 31st December, 1931:—

(	I) No. of cases admitted		165
(	2) Average duration of stay		14'75 days
(	3) No. of cases notified as :		
	(a) Puerperal fever		None
	(b) Puerperal pyrexia		3
	(c) Pemphigus neonatorum		None
	(d) Ophthalmia neonatorum		None
(,	4) No. of infants not entirely breast fed whils	t	
,	in the Institution and reason why—		
	(a) Mother—Mastitis	• •	2
	(b) ,, General Debility		8
	(c) ,, Pulmonary Tuberculosis		I
	(d) ,, Mental Depression and		
	General Debilit	у	2
	Total	9 * *	13
(	5) No. of maternal deaths and cause		None

(6) No. of fætal deaths and cause :—			
(a) Still-born			9
Macerated		7	
Hydrocephalic	•	I	
Extended breech		I	
. (b) Within 10 days of birth			4
Intercranial hæmorrhage	c 6 6	I	
Prematurity (twin child)		I	
Cerebral convulsions		I	
Spina-bifida or hydrocept	nalic	I	
(7) No. of children born			166
(8) Transferred to Leigh Infirmary for	Cæsarear	1.	

The Local Authority has not entered into any arrangements for the employment of consultants except under the Puerperal Fever and Puerperal Pyrexia Regulations.

There is no definite co-operation between the Voluntary Hospitals and the Corporation, but by subscribing to the hospital funds admission of a limited number of patients is procured.

The following is a list of the Annual Subscriptions to Hospitals:—

Section...

			£	s.	d.
Manchester Eye Hospital			8	8	O
Manchester Ear Hospital			5	5	O
Manchester Royal Infirmary			50		O
St. Mary's Hospital			3	3	O
Manchester Children's Hospit	al		26	5	0
Leigh Infirmary	• * •		50	0	O
Salford Royal Hospital			10	ΙO	O
N.S.P.C.C.			3	3	O
	-				
	Total	£	157	2	0

#### MATERNITY AND NURSING HOMES.

	Nil
	Nil
	Nil
	Nil
	Nil
	Nil
- • •	Nil
	Nil
	Nil

#### MATERNAL MORTALITY.

All maternal deaths are investigated by the Medical Officer of Health and reported to the Maternal Mortality Committee of the Ministry of Health on forms supplied for the purpose.

The assistance of the medical attendant, midwife and all those associated with the case is sought in an endeavour to secure all the facts on which to base an opinion of the cause and find future preventative measures.

Necessity for such enquiry has arisen in one case only during the year.

Similarly an investigation is made in all cases of Puerperal Fever and Puerperal Pyrexia.

# INSTITUTIONAL PROVISION FOR UNMARRIED MOTHERS, ILLEGITIMATE INFANTS AND HOMELESS CHILDREN.

No institutional provision is provided.

#### AMBULANCE FACILITIES.

- (a) For infectious cases.—Motor ambulances for removal of infectious cases to the Sanatorium at Astley are provided by the Joint Hospital Board, and are housed at the Sanatorium.
- (b) For non-infectious and accident cases.—Four motor ambulances are provided by the Local Authority and housed at the Fire Station. Residents are removed free within the Borough and to a distance up to 15 miles if being conveyed to a Hospital, Infirmary or Nursing Home.
- (c) Maternity patients are removed in the motor ambulances of the Local Authority.

#### CLINICS AND TREATMENT CENTRES

The only new Clinic which has been provided is an Ante-natal Clinic in connection with the Maternity Home.

Increased Clinic accommodation has been arranged for and approved by the Ministry of Health and Board of Education at Stone House following the evacuation of a portion of the premises previously used as the Maternity Home. Occupation has been postponed pending the appointment of a cleaner and other domestic matters in connection with the building.

The scheme consists of the use of more rooms in which the present services would be carried on and the engagement of an additional clerk.

Although little has been done in the way of providing new clinics considerable extension of the facilities of those in existence has been made particularly in the direction of the care of the expectant mother.

By the establishment of the new Maternity Home the number of beds has been increased from 5 to 18. The receiving room of the Home is used to house an Ante-Natal Clinic at which the private practitioner is invited to carry out his ante-natal work; sterilized maternity outfits are supplied, free or at cost price, on the request of doctor or midwife, for mothers confined in their own homes; the midwives are invited to accompany their patients to the ante-natal Clinic and take part in the examination of those in whom they are interested; notification of the attendance of the expectant mother to the Clinic is sent to the midwife along with the necessary advice, when she does not accompany her patient; educational pamphlets urging the necessity of ante-natal attention and pointing out the facilities provided for the purpose are distributed to expectant women and others and the importance of the matter is emphasised in the Health Week literature and addresses.

Milk, etc., free or at reduced price, and home helps have been provided for some time.

The following are a few of the details of the work of the Centres for 1931:—

481 babies were entered on the books.

4192 attendances by infants.

1185 consultations.

247 ante-natal consultations.

8 deaths of babies on the books.

#### FOOD DISTRIBUTED AT CENTRES.

	Free.	Sold.
Dried Milk (11b. packets)	 $9,721\frac{1}{2}$	$9,310\frac{1}{2}$
Vitamine Malt (40z. pots)	 62	$218\tfrac{2}{3}$
Emulsion (bottles)	 595	190
Horlicks (bottles)	 3	49
Ostelin Cream (bottles)	 24	126
Petrolagar (bottles)	 3	8
Secway (tins)	 5	2
Trufood (tins)	 239	749
Strenthol (bottles)	 $322\frac{1}{2}$	$199\frac{1}{2}$
Bonum Emulsion (bottles)	 247	54
Chocolate Milk (packets)	 263	88

#### HEALTH VISITING

The Health Nurses made 2,634 home visits during the year of which 1,061 were to children between the ages of 1 and 5 years.

The arrangements for visiting are adequate and all the facilities provided by the Education Committee for treatment at their Clinics are also available for Children of pre-school age.

The following is a summary of the Health Nurses' work:—

Primary Visits .		• •			744
Re-visits	• • •		1890 {under over 1	ı year, year,	829 1061
Still-births .	• • •		• · •		32
Ophthalmia Neona	atorum			. • •	39
Visits to Worksho	pps		• • •		27
Interviews .	• • •				454
Ante-Natal Visits	• • •				23
Puerperal Fever V	isits				
Miscellaneous Vis	its		. •		1364

### Day Nurseries.—There are none in the district.

### CHILDREN ACT, 1908

Registers are kept of Infants who are Received for Reward and Persons Receiving Infants for Reward and the residences of the infants frequently visited.

The Health Nurses are authorised to exercise the powers of infant protection visitors, and in addition make frequent enquiries to ascertain whether there are other infants in respect of whom notice should have been given.

#### TUBERCULOSIS.

This service is under the control of the Lancashire County Council. The central dispensary of one of the county areas is situated in the town. The following statement of particulars regarding the district, was supplied by the Consultant Tuberculosis Officer:—

	Adult				
	15 and ov	ver. Cl	hildren	1	Γotal.
No. of cases admitted to Sanatoria	8		3		11
No. of cases admitted to Pulmonary	Hospitals 30		_		30
No. of cases admitted to General Ho	ospitals 6		7	٠.	13
No. of cases granted Skin Hospital'	Treatment 1				1
No. of cases granted Artificial Light	Treatment 9		6		15
No. of cases granted X-Ray examin	ation 134	• /	43		177
No. of cases granted Dispensary Su	pervision				
or Dispensary Treatment	194		42		236
No. of cases under supervision on 3	ıst				
December, 1931	167		45		212
Pulmonary	96`		5)		101
Non-Pulmonary	64	167	37	45	101 212
Combined (Pulmonary & Non-Puli	nonary) 7	J	3)		10)
Removed from Register during the	year				
as recovered	13	• • •	4		17

The County Tuberculosis Dispensary, 13 Church Street, is open each Wednesday and Friday at 10-0 a.m. and also on the second Thursday in each month at 6-30 p.m. for patients who are working. Close co-operation has been maintained between Medical Practitioners, including the School Medical Officer, who regularly sends children with suspicious symptoms, and the Tuberculosis Staff. Working in close association with the Dispensary, there is a voluntary Care Committee which meets monthly at the Dispensary for the purpose of

providing clothing, nourishment, &c., for poor consumptives in order to enable them to persevere with their long course of treatment and prevent their becoming chargeable to the Public Assistance Committee.

Artificial Light Treatment is now available for patients from this Dispensary.

#### VENEREAL DISEASES.

The scheme for treatment is administered by the County Council.

There is no centre for treatment in the town, but a choice can be made from Bolton, Wigan, Manchester, Salford and Warrington, all very accessible, and fares are paid in necessitous cases.

The Public Health Department acts as an information bureau to patients and medical practitioners.

The County Council supplies outfits for the collection of specimens and examinations free of charge. Salvarsan substitutes are also supplied free to approved medical practitioners. The service provided is decidedly adequate, but patients fail to embrace the full benefit by stopping treatment prematurely. Some compulsory means to ensure full course is necessary before the expenditure entailed can be considered remunerative.

#### SANITARY CIRCUMSTANCES OF THE AREA.

Water Supply.—Purchased in bulk from the Liverpool Corporation, and is gathered from upland moors. It is frequently chemically examined and found satisfactory. The lead solvency action found to exist some years ago is effectively checked by systematic treatment. Service reservoir equals one day's supply. Average daily consumption per head, 17.81 gallons.

#### RIVERS AND STREAMS

The attention of the Mersey and Irwell Watershed Joint Committe was called to pollution of streams in the district.

A little trade waste, sump water from coal mines and sewage from the Leigh Rural District gave most concern.

Temporary cessation usually followed informal notice.

Drainage and Sewerage.—The whole of the urban portion of the district is sewered. There is no separate system for surface water. The sewage is treated by the Leigh and Atherton Joint Sewerage Board, situated in the Borough, by means of bacteria filter beds. The effluent is satisfactory.

Extension of sewers has been necessary to deal with the newly built houses and a short length was laid to short-circuit and relieve an overloaded sewer which had been the cause of occasional flooding of the highway.

#### Closet Accommodation.

Number of Houses ... ... ... ... ... 11,051
Fresh Water Closets ... ... 10,003
Waste Water Closets... ... 852
Privies ... ... ... 91 (No water supply or sewer available).
Pails ... ... ... ... 7

Water closets have now been provided to all houses where a water supply and sewers are available.

The number of conversions during the last five years was 151.

Scavenging.—Street scavenging, collection and disposal of house refuse are undertaken by the Cleansing Committee of the Corporation.

The following details have been supplied by the Superintendent of that Department:—

(1) Ashpits and Bins in the district:

Dry Ashpits ... ... ... 3,825
Bins ... ... ... ... 11,259

(2) Number of Ashpits, Bins and Pails emptied:—

No extension of the service has taken place during the year.

## SANITARY INSPECTION OF THE AREA.

## (a) Summary of Inspections.

$(\alpha)$	Summary of this	spections	•				
	In connection wit	h Infectio	us Dise	eases (a) P	rimary		125
				(b) R	e-visits		362
	Slaughter-houses						714
	Piggeries			• • •	• • •		51
	Dairies and Cow	sheds			a • •		53
	Milk Shops				,		27
	Bakehouses		• • •				32
	Common Lodging	g-houses		• • •			7
	Vans and Tents						9
	Offensive Trades						151
	Factories				• • •		2 I
	Workshops	• •					89
	Schools				• • •		92
	Ice Cream Maker	`S					47
	Canal Boats						20
	Houses inspected						
	(a) For Nuis	ances					397
	(b) Under H	ousing Ac	cts (exc	luding (a)			35 I
	Re-visits for Nuis	sances				<b>\$</b> 41	1495
	Visits for other c	auses					1721
	Interviews with	Owners					106
	,,	Contractor	rs				71
		,					·
(b)	Defects or Nuis	ances for	and.				
	Defective House	Drains		• • •			406
	,, Gullies		• • •				44
	,, Sink P						6 i
	,, Sinks	_					11
		Closets	• •	* * *	• • •		198
		ıs		• •		• •	65
	,, Spouti						126
	,, Roofs						250
	, ,			g and Yard			28
	TOTAL A TIT	•••	-	• • •			9
	Damp Houses		• • •				47
	Insufficient Venti			* * *	0 6 4		14
	Other Defects		• • •	• • •			333
							000

#### (c) Notices Served.

(a)	Informal	 	 	 607
(b)	Statutory	 		66

### (d) Result.

Number of	Nuisances	dealt with			• • •	1592
, ,	. ,,	abated after	statutory	notice		22 I
			informal	notice		1228

#### SMOKE ABATEMENT.

Owners and stokers of works chimneys are interviewed when excessive smoke is observed being emitted. An effort to avoid the nuisance is made with more or less success.

No prosecution has been undertaken.

The Local Authority is a member of the Manchester and District Regional Smoke Abatement Committee, which body is endeavouring to form a Regional Statutory Committee if support is given by the constituent Local Authorities.

# Premises and Occupations which can be controlled by Bye-laws and Regulations:—

Public Baths	• • •	• • •	• • •	• • •	• • •	2
Slaughter-houses	Regist	tered			• • •	ΙI
,,	Licens	sed			• • •	6
Offensive Trades-						
Gut Scraper	• • •				• • •	I
Tripe Boilers	• • •			** * *		2
Common Lodging	-house	es	• • •	• • •	• • •	I
Maternity Home						I

Tents, Vans and similar structures used for human habitation. Dairies and Cowsheds.

Three vans and a shed used for human occupation have been closed by informal action.

No Bye-laws have been adopted in regard to houses let in lodgings. I consider such a step very desirable, and have advised my Committee to that effect. The number of houses so used is on the increase.

There are no underground sleeping rooms in the Borough. I therefore do not see the need for Bye-laws regarding them.

#### OTHER SANITARY CONDITIONS REQUIRING NOTICE

The South West end of the district is subject to considerable subsidence from coal mining. Accumulation of water and serious damage to the sewers result. In flood time the sewers overflow, on account of the disturbance of their levels, and sewage runs into the accumulated water causing serious pollution of practically stagnant pools.

#### CANAL BOATS ACTS.

Inspected	 • • •	 		 20
Registered and in use	 • • •	 		 124
New Boats registered	 	 • • •		 Nil
Infringements reported	 	 	,	 Nil

#### RATS AND MICE DESTRUCTION ACT.

The Health Committee have an arrangement with three voluntary rat-catchers to pay the cost of two dog licences, two ferrets and some netting each year in return for spare-time service.

During the year 1340 rats were destroyed.

### FACTORIES, WORKSHOPS AND WORKPLACES.

## I.—INSPECTION OF FACTORIES, WORKSHOPS AND WORKPLACES

(Including Inspections made by Sanitary Inspectors).

		Number o	
	Number of	Written	Number of
Premises.	Inspections.	Notices.	Prosecutions.
Factories (including Factory Laundries)	21 .	7	Nil
Workshops (including Workshop Laundries)	121 .	• .	Nil
Workplaces (other than Outworkers premises	s) 198 .		Nil
Total .	340 .	7	Nil

## 2.—DEFECTS FOUND IN FACTORIES, WORKSHOPS AND WORKPLACES.

Particulars.				er of D	efects. Remedied.
Nuisances under the Public Health	Acts—				
Want of Cleanliness		• • •	7		7
Want of Ventilation		• • •			
Other Nuisances	• • •	• • •		• • •	
Sanitary accommodation—					
Unsuitable or defective	• •			• • •	
	Total	• • •	7	• • •	7

#### Schools.

Public Elen	nentary-	-(a)	Provided	d	 1	
,,		(b)	Non-Pro	ovided	 17	
Secondary-	-Girls				 I	
, ,	Boys		• • •	,	 I	
Technical					 1 ) C	ne building
Junior Day	Technic	al			 1	used in common.
Private					 2)	common.

The Public Elementary Schools are frequently visited and the sanitary arrangements kept under strict observation. Defects are reported to the Education Committee for attention.

All the Schools are supplied by the Corporation water supply and have a sufficiency of fresh water closet accommodation. Most of them are on the trough system and are intended to be flushed automatically.

The system is not satisfactory; it is too dependent on the personal element, and all caretakers are not sufficiently interested in this part of their work. Great vigilence is necessary to maintain a reasonable condition of cleanliness. Conversion to wash down flush system is being carried out at most of the Schools.

The provision for washing at some of the Schools is far from satisfactory, and lack the degree of cleanliness desirable in a teaching establishment.

The cloak-rooms are not suitable, badly lighted and unheated in most Schools.

A defect common to nearly all Schools in the Borough is the unpaved playground. Cinders are generally used to cover the ground surrounding the School building, with the result that in dry weather a cloud of black dust is floating about, and on wet days the children have to play in a black quagmire, much of which is carried on the boots and clogs and deposited in the class-room.

Efforts are being made to reduce the obnoxious conditions by paving at least some portion of the yards.

The three age groups and specials are inspected yearly in the Public Elementary Schools.

An Inspection Clinic is held weekly for the re-inspection of those ound defective, examination of children convalescent from infectious diseases before re-admission to School, inspection of children referred to the Clinic by teachers, etc., including those receiving treatment at the Minor Ailment Clinics.

Clinics for the treatment of dental defects, tonsils and adenoids defective vision, ear, nose and throat diseases, and the application of artificial sunlight, are provided.

Efforts to prevent the spread of infectious disease in the Schools have been carried out for some years much on the lines recommended in the Board of Education's Memorandum on Closure of and Exclusion from School, 1925.

All School children, whether attending public or private Schools, suffering from an infectious disease are excluded from School for a definite period according to the particular disease, and not re-admitted except on the certificate of the Medical Officer of Health, who is also School Medical Officer.

Home contacts are excluded for two days only. For the next 14 days or so special arrangements are made for them to visit the Clinic each School day, and unless examination reveals evidence of illness they are sent on to School.

By this means they are under daily observation of the Health Staff, and the loss of School attendance diminished.

The ascertainment of notifiable infectious cases is generally secured by notifications by medical practitioners. Cases of non-notifiable diseases are reported by Head Teachers, Health Nurses, School Attendance Officers, parents and the Principals of Private Schools.

The Schools are disinfected on the occasion of an outbreak of infectious disease and during holidays.

The personal books and school appliances of infectious cases are destroyed or occasionally disinfected, and the desk and its surroundings occupied by the child well washed with disinfectant.

It is rare to be able to trace infection to a School mate except in the case of Measles and Whooping Cough. The home of the infectious child is fumigated by gaseous formaldehyde on convalescence or removal.

#### RAG AND FLOCK ACTS.

No premises in the Borough are used for this purpose.

## HOUSING.

No	o. of new houses erected during the year:—	
	(a) Total (including numbers separately under (b)	141
	(i) By Local Authority	I 20
	(ii) By other Local Authorities	
	(iii) By other bodies or persons	2 I
	(b) With State assistance under the Housing Acts:	
	(i) By Local Authority	120
	(ii) By other bodies or persons	Nil
1.	Inspection of Dwelling-Houses during the Year.	
	(1) (a) Total number of Dwelling-houses inspected for	
	housing defects (under Public Health or Housing	
	Acts)	748
	(b) Number of inspections made for the purpose	1495
	(2) (a) Number of Dwelling-houses (included under	
	Sub-head (1) above) which were inspected and	
	recorded under the Housing Consolidated	
	Regulations, 1925	351
	(b) Number of inspections made for the purpose	1374
	(3) Number of Dwelling-houses found to be in a state	
	so dangerous or injurious to health as to be unfit	
	for human habitation	96
	(4) Number of Dwelling-houses (exclusive of those	
	referred to under the preceding sub-heading) found	
	not to be in all respects reasonably fit for human	
	habitation	573
2.	Remedy of Defects without Service of Formal Notices.	
ind o	Number of defective Dwelling-houses rendered fit in	
	consequence of informal action by the Local Authority	
	or their Officers	607
2	ACTION UNDER STATUTORY POWERS.	·
3.	A. Proceedings under Section 17, 18, and 23 of the	
	Housing Act, 1930.	
	(1) Number of Dwelling-houses in respect of	
	which notices were served requiring repairs	Nil
	(2) Number of Dwelling-houses which were	
	rendered fit after service of formal notices	
	(a) by Owners	Nil
	(b) by Local Authority in default of	
	Owners	Nil

<i>B</i> .	Proceedings under Public Health Acts.	
	(1) Number of Dwelling-houses in respect of which notices were served requiring defects to be remedied	66
	(2) Number of Dwelling-houses in which defects were remedied after service of formal notice—	
	(a) by Owners (b) by Local Authority in default of	63
	Owners	Nil
C.	Proceedings under Sections 19 and 21 of the Housing Act, 1930.	
	(1) Number of Dwelling-houses in respect of which Demolition Orders were made	Nil
	(2) Number of Dwelling-houses demolished in pursuance of Demolition Orders	Nil
D.	Proceedings under Section 20 of the Housing Act, 1930.	
	(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	Nil
	(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	Nil
$\mathcal{L}^{r}$	Duagadings under Section a of the Housing Act 1005	
E.	Proceedings under Section 3 of the Housing Act, 1925.  (1) Number of dwelling-houses in respect of which notices were served requiring repairs	Nil
	(2) Number of dwelling-houses which were rendered fit after service of formal notices—	1111
	(a) By owners (b) By Local Authority in default of	Nil
	owners	Nil
	(3) Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by owners of	
	intention to close,	Nil

F.	Proceedings under Sections 11,	14 and 15 of the
	Housing Act, 1925.	

(1) Number of dwelling-houses in respect of which Closing Orders were made ... Nil

(2) Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit

Nil

(3) Number of dwelling-houses in respect of which Demolition Orders were made ...

Nil

(4) Number of dwelling-houses demolished in pursuance of Demolition Orders... ...

Nil

#### INSPECTION AND SUPERVISION OF FOOD.

(a) Milk Supply.—Samples are frequently taken and tested for cleanliness.

Cowsheds and Dairies are frequently inspected. During the year 141 visits were made.

Samples are submitted for bacterial content and tubercle infection.

The sale of milk in bottles is increasing, supplies of Certified, Grade "A," Pasteurised and Sterilised being available.

The Veterinary Inspector made 123 visits during the year and found 18 milch cows suffering from tuberculosis.

The number of distributors of designated milk is as follows:—

 Certified...
 ...
 ...
 ...
 ...
 ...
 ...
 5

 Pasteurised
 ...
 ...
 ...
 ...
 ...
 ...
 3

The following is the state of the register on December 31st,

 Cowkeepers
 ...
 ...
 ...
 57

 Retail Purveyors
 ...
 ...
 ...
 38

 Dairy Farms
 ...
 ...
 ...
 58

(b) Meat and other Foods.—The slaughter-houses are visited regularly following notice of intention to slaughter and at irregular times. Seven hundred and fourteen visits were made, and the following number of carcases inspected:—Cattle, 3,045; Sheep, 5,022; Pigs, 3,582; Total, 11,649 carcases.

The shops, stalls and vehicles are also kept under constant observation.

There is a general inclination to comply with the Meat Regulations.

There is no public slaughter-house.

Private slaughter-houses: Registered 11; Licensed 6; Total 17.

With the exception of three they are small and scattered about the district. Efforts are made to secure voluntary surrender of the registered slaughter-houses as opportunity arises.

The following unsound food was condemned, voluntarily surrendered and destroyed:—

 Beef
 ...
 ...
 17,207 lbs.

 Pork
 ...
 ...
 1,285 ,,

 I basket cherries
 ...
 ...
 18 ,,

(c) Adulteration, etc.—The Lancashire County Council carry out the Sale of Food and Drugs Acts. Samples for analysis are taken by the County Police.

The Local Police Superintendent reports that during 1931 the following samples were taken in the area and submitted to the Public Analyst for examination:—

Milk		• • •	* * *		65
Butter					6
Margarin	е				8
Lard					8
Tea				2	2
Pepper					3
Rice					I
Coffee					2
Jam			4 6 (		2
Sago					I
Cheese					2
Oatmeal					2
Baking P	owde	r	* * *		2
Bicarbona	ate of	Soda			I
Ginger			• • •		3
Sugar					I
Arrowroc	t				I
Mustard				• •	I
Barley		4 8 6			I
•					
		Total			I I 2

No prosecutions were undertaken during the year.

- (d) Chemical and Bacteriological Examination of Food.—Chemical analysis is carried out by the Public Analyst. Bacteriological analysis is carried out by :—
  - (1) Evans' Biological Institute, Runcorn.
  - (2) Public Health Laboratory of the Manchester University.
- (e) **Nutrition.**—Addresses and distribution of literature during the Health Week.

Advice and distribution of literature at Welfare Centres and School Clinics.

# PREVELANCE OF, AND CONTROL OVER, INFECTIOUS DISEASES. NOTIFIABLE DISEASES.

The following diseases were compulsorily notifiable in the area:

Small-pox

Cholera

Membranous Croup

Erysipelas

Scarlet Fever

Typhus Fever

Typhoid Fever

Enteric Fever

Continued Fever

Relapsing Fever

Puerperal Fever

Cerebro-Spinal Fever

Acute Poliomyelitis

Encephalitis Lethargica

Ophthalmia Neonatorum

Tuberculosis

Malaria

Dysentery

Trench Fever

Acute Primary Pneumonia

Acute Influenzal Pneumonia

SUMMARY OF NOTIFICATIONS OF THE PRINCIPAL INFECTIOUS DISEASES.

Disease.	 Case Rate per 1000 living, Leigh.
Small-pox Scarlet Fever Diphtheria Enteric Fever Puerperal Pyrexia Erysipelas	 0.00 0.26 1.13 0.04 0.13 0.41

Difficulty has been experienced in making satisfactory arrangements for the after-care of cases of Encephalitis Lethargica.

Residence in an institution is the most suitable treatment for most of the surviving patients sooner or later. Unfortunately there is no institution catering for this class of case.

Disinfection of premises and materials is carried out by the staff of the Public Health Department. All dwelling-houses are dealt with on death, removal or convalescence of infectious patients. Other premises are frequently disinfected on request and where necessity is apparent. The Schools are also frequently disinfected—particularly during periods of epidemics or the known presence of an infectious child. Private Schools are treated on request. Gaseous Formaldehyde is used for buildings, and a steam disinfector is available for clothes, bedding, etc. One hundred and thirty-eight premises were disinfected during the year on account of the following diseases:—

Scarlet Fever	• • •	• • •	• • •		27
Erysipelas	• • •			• • •	2
Diphtheria	• • •				50
Phthisis	• • •	• • •	• • •	•	43
Cancer	• • •	w 6		Ø Ø 6,	2
Pneumonia	v • •				3
Encephalitis Let	hargi	ca			I
Puerperal Pyrex	ia		• • •	• • •	3
Chicken-pox				, • •	2
Enteric Fever			• • •	b 0 0	3
Cerebro Spinal l	Fever		• • •	<b>.</b> • •	3
	,	Total	• •		138

Steam disinfection of the following bedding was carried out:-

No. of Beds from Institutions ... ... 21
,, Bundles of Bedclothes ... 8

Total ... 29

Library books found in houses in which infectious disease is present are confiscated and either disinfected and returned to the Library, or, if dirty and dilapidated, destroyed.

The following are particulars of Library books so dealt with:

No. of Books disinfected and returned to Library... ... 25

No. of Books destroyed... ... —

Total ... 25

No use has been made of the Schick and Dick tests or immunization against Diphtheria and Scarlet Fever.

No vaccinations were performed by the Medical Officer of Health under the Public Health (Small-pox Prevention) Regulations, 1917.

Information of the presence of non-notifiable infectious diseases is very scant. A few cases of illness were notified by the parents, but the majority were ascertained through the Teachers, School Attendance Officers and Health Nurses.

As far as possible each case was visited by a Health Nurse at least once to impress on the parents the importance of medical attendance. When infectious cases are prevalent the Head Teacher of each School makes a daily return of children absent from School on account of illness supposed to be infectious. This practice is found to be of great service, particularly in the case of non-notifiable infectious diseases.

The death rate from Cancer remains fairly constant and as far as I can gather the incidence is also not materially disturbed.

The following tables give some particulars with regard to the deaths from the disease during the year 1931:——

	Se	ex :-			le				8),	Taka '	1 =0	
				Fe	mal	э	• • • • • •	2	4) 1	.ota.	l 52	
	0	ccu	pat	ion	:	Housewife20						20
						Coa	ıl M	12				
						Out	tdoo	r I	labo	oure	r	6
						Ind	oor	La	bou	rer.	• • • • • • • •	1
						Cot	ton	Or	era	tive	• • • • • • • • •	4
		Domestic 3										3
				6								
Site.	Breast.	Liver.	Lungs.	Uterus.	Stomach	Rectum.	Other parts of Digestive tract.	Larynx.	Glands and Skin	Miscellaneous.	Total.	
Number	7	6	2	3	10	6	7	3	6	2	52	
Age.	Under 50.	1	50-55.	55-60.	60-65.	65-70.	70-75.		75-80.	Over 80.	Total.	
Number	10	8	}	6	9	6	8		4	1	52	

An address on Cancer was delivered during the Health Week and a brochure on the subject distributed. Pamphlets are also handed to mothers attending the Welfare Centres.

The death rate of this disease is somewhat lower than that of the County of Lancashire and of England and Wales.

There is no disinfesting station; bedding and other clothing are treated in the steam disinfector.

Diphtheria Anti-toxin and swabs are supplied by the Local Authority and special arrangements are made to facilitate the distribution to medical practitioners so that they may always have in their possession at least one swab and a preliminary dose of serum for immediate use. They are urged to administer an early application even to doubtful cases of the disease.

The majority of the cases of Acute Primary and Influenzal Pneumonia are notified.

The Infectious Hospital is controlled by the Leigh Joint Hospital Board.

The average length of the patients stay in hospital certainly has not been shortened.

Scarlet Fever cases are nursed at home when conditions are suitable.

Diphtheria patients are almost invariably sent into Hospital.

## NOTIFIABLE DISEASES (OTHER THAN TUBERCULOSIS).

			Total Cases notified.		Total Deaths.		No. of Cases removed to Hospital.		of Deaths in Iospital.
Small-pox	• • •				<del></del>		a		continues theretoe
Diphtheria	• • •		52	• • •	2	0 4 7	50	• • •	2
Erysipelas	• • •	• • •	19	• • •		• • •	2		_
Scarlet Fever	• • •		26					• • •	
Enteric Fever	• • •		2		I		2		I
Puerperal Feve	r				enterment gellige	• • •		• • •	
Puerperal Pyrex	kia		6	• • •			4		
Ophthalmia Ne	onator	um	6	• • •			risus en	• • •	
Pneumonia		• • •	92		58	• • •	_		
Encephalitis Le	thargi	ca	I		I		(Palama Bibl)	• • •	_
Cerebro Spinal	Fever		2				I	• • •	
Dysentery	• • •	3	I		er-render P		I		

Analysis of Cases of Infectious Disease notified, Number of Deaths from these Diseases, Number of Cases removed to Hospital, and Deaths in Hospital during the year 1931.

	-HOSPITAL	Deaths in Hospital of persons belong- ing to district		2	1	ļ	Ι	1	!		1		1	-							cc	
	Ho	Total Cases remoyed to Hospital		50	2	2 I	2	1	4	.				I	1				1	1	80	
		Total Deaths		2			Ι	}	.			}		!	<b>—</b>	58	25	1	1	1	94	
		65 and over			8	-	-				-			}		4	7				$\infty$	
		45-65 years			00						-	-				13	II				32	
1931		35-45 years		S	2		Ι							1	-	I 0	9	Ι			24	
/במו		20-35 years		4	rV	23	_		9					-	I	16	13	rC			52	
רוום		15-20 years		10	7	H		1	1							7	9	63			23	
	FIED-	10-15 years		14		4		1						-		3	_	9	Ι	1	29	
ממו	NOTIFIED	2-10 years		19		13		-						-		13		10	28		83	
ospitai	-CASES	4-5 years		rV		3	}	1	1	1					-	9			$\infty$		22	
1110		3-4 years		I	1						İ					13			1		7	
115 11		2-3 years	1	I		7						1				I		1	I	1	w	
Deal		1-2 years				1								-		$\infty$					$\infty$	
removed to mospital, and Death		Under I year				Ι					9					9	-	i	7		15	
tal, e		Total Cases at all ages		52	61	26	73		9		9			Ι	Ι	92	40	28	41		314	
osbi			:	:	:	:	:	:	:	:	:	:	:	:	:	:	:	:	:	rict:		
11 01				dı			(bioid)	•											•	District		
n			:	Croup	:	:	Paratyphoid)	:	:	:	•	:	:	:	:	:	:	:		the	:	
01112			:	ons (	:	:	ara	:	:	:	:	:	:	:	:	ıia }	:	Sis	: :	111	S	
-		Disease.	•	Membranous	•		l Su	٠	•	•	um.	•	•		ia.	onia mon	sis .	cul		тнес	Totals	
		Dise	:	qua	:	:	ludi	:	:	S	ator	•	•	,	rgic	eum	ulos	ubei	:	not	I	
							(inc]	7	xia	eliti	eon				etha	Pne al P	oerc.	f T		ase		
			•	anc	:	7er	ver	Feve	yre	omy	Z	•	rer	:	SL	ary	Tul	o su	(	Uise		
			ХC	eria	las	Fer	Fe	ral ]	rall	Polic	lmia	_	Fer	ery	aliti	rim nflu	lary	Porn	rodu	ier .		
			Smallpox	Diphtheria and	Erysipelas	Scarlet Fever	Enteric Fever (including	Puerperal Fever	Puerperal Pyrexia	Acute Poliomyelitis	Ophthalmia Neonatorum	Malaria	Trench Fever	Dysentery	Encephalitis Lethargica	Acute Primary Pneumonia Acute Influenzal Pneumonia	Pulmonary Tuberculosis	Other Forms of Tuberculosis	Chickenpox	Any other Disease notified in the		
			Sm	Dip	Ery	Sca	Ent	Pue	Pue	Act	Opl	Ma	Tre	Dys	Enc	Act	Pul	Oth	Ch:	Any		

## PREVENTION OF BLINDNESS.

Cases of Ophthalmia Neonatorum are nursed at home by the Health Nurses. If the Medical Attendant requests, the patient and mother are admitted into the Manchester Royal Eye Hospital under arrangements made by the Local Authority with the Hospital.

#### OPHTHALMIA NEONATORUM.

	CASES	TREATED.				
Number	$\mathbf{A}t$	In	Vision Un-	Vision	Total	
Notified.	Home.	Hospital.	impaired.	impaired.	Blindness.	Deaths
6	6	Spinolempore,	6	Nil	-Nil	Nil

### TUBERCULOSIS.

#### NEW CASES AND MORTALITY DURING 1930.

	NE	W CAS	ES.					DEA	THS.	
	periods.	Pulmo	nary	Non-Puli	monary		Pulmor	nary N	on-Pulmo	nary
Y	ears.	$\mathbf{M}_{ullet}$	F.	м.	F.		M.	F.	м.	F.
0-1	• • •	0	О	O	О		Ο	Ο	0	Ο
1-5	• • •	0	Ι	3	I		О	О	I	I
5-10	• • •	O	Ο	6	4		Ο	Ο	I	1
10-15		0	I	3	3	• •	О	I	0	О
15-20	• • •	2	4	I	I		О	I	0	О
20-25		4	2	ì	О		2	I	0	О
25-35		4	3	2	2	• • •	2	2	0	I
35-45	• • •	3	3	О	I		3	I	I	I
45-55	• . •	6	2	О	0		5	I	О	О
55-65	• • •	3	О	Ο	О		3	I	0	О
65 and	upwards	2	О	О	Ο		2	Ο	O	О
										-
		24	16	16	I 2	• •	17	8	3	4
	Totals	4	.0	28	3		25		7	

The ratio of non-notified deaths from Tuberculosis during the year was seven to sixty-eight.

#### OCCUPATION OF NOTIFIED TUBERCULOSIS CASES.

Under 5 years	• • •	 5	Cotton Operatives	 15
Scholars (5 to 14	years)	 16	Shop Assistant	 I
Domestic		 9	Weavers	 2
Coal Miners	( • •	 10	Machinist	 I
No occupation	• •	 5	Road Surveyor	 I
Labourers		 2	Insurance Agent	 I

#### TUBERCULOSIS REGISTER.

	No. of Cases—	м.	Pulmona F.	ry. Total.		-Pulmo F,	nary. Total.		l Pulmor on-Pulm F.	
(a)	On Register at									
	commencement of									
	year	82	44	126	67	68	135	149	112	261
(b)	Notified for first									
	time during the									
	year	23	16	39	16	IO	26	39	26	65
	Total (a) and (b)	105	60	165	83	78	161	188	138	326
(c)	Removed from									
	Register during									
	the year	16	8	24	IO	IO	20	26	18	44
(d)	Remaining on		The second secon				to to a few and to the second			
	Register at end									
	of year	89	52	141	73	68	141	162	120	282

## PUBLIC HEALTH (PREVENTION OF TUBERCULOSIS) REGULATIONS, 1925.

No employee of the milk trade was notified as suffering from Tuberculosis.

## PUBLIC HEALTH ACT, 1925—SECTION 62.

No occasion arose requiring the Section to be used.

#### PROPAGANDA

Propaganda was undertaken by members of the Staff of the Department by courses of lectures to Guides and Scouts to qualify them to obtain the "Health Badge" and the "Public Health Badge."

Some 400 young persons have, so far, been instructed in the elements of personal and public hygiene.

They were also conducted on Saturday afternoons to sewage works, destructor works, dairy farms, etc., and the practical application of hygiene demonstrated.

The Annual Leigh Infirmary Carnival and Demonstration was made use of for propaganda purposes.

A very large amount of work has been done by the department during the year, and I have to thank every member of the staff for their hearty co-operation.

At the same time I would like to take this opportunity of placing on record my appreciation of the cordial support afforded me by the Health Committee and the Council.

I am, Gentlemen,

Your obedient Servant,

J. CLAY BECKITT,

Medical Officer of Health.



